#### STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

## RECEIVED

JUL 1 6 2018

Legislative	Solutions, L.L.C.		
(Name of partr	ership, firm or corporation)		JV1419,
III. Name of Client			Date <del>April 9</del> , 2018
Political Contributions For each political contribut client/lobbyist and lobbying			oter 664 paid on behalf of the
Full name of candidate:	Daniels	Gary	
_	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 250	0.00	Office Candidate i	s Seeking Senate
Full manner of soundidates.	Morco	Chuck	
Full name of candidate:	Morse (Last Name)	Chuck (First Name)	(Middle Name/Initial)
_	(Last Name)	Chuck (First Name) Office Candidate is	(Middle Name/Initial) s Seeking Senate
Amount of contribution \$ 100  If the contribution is an in-kin actual cost of the in-kind contribution is an in-kind contribution in the in-ki	(Last Name) 00.00 d contribution, provide ribution on the line above	(First Name)  Office Candidate is a description of the good	
Amount of contribution \$ 100	(Last Name) 00.00 d contribution, provide ribution on the line above	(First Name)  Office Candidate is a description of the good	s Seeking Senate  ds or services provided, and enter the

the contribution is an in-kind contribution, provide a descriptual cost of the in-kind contribution on the line above for a nestimated value and the word "estimate."	
sol an obtained value and the word obtained.	
	· · · · · · · · · · · · · · · · · · ·
If more than three contributions were made, report additional contr	ributions on separate addendum C forms.)
worn Statement/Affirmation by Lobbyist	
have read RSA 15, RSA 15-B and RSA 664 and hereb s true and complete to the best of my knowledge and b	
	July 19, 2018
(Signature of lobbyist)	(Date)
Debra Vanderbeek	
nt Name of lobbyist)	

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t ogislativo S	Solutions, L.L.C.		
	ership, firm or corporation)	<del></del>	
( u. p			Jvly 19 Date <del>April 9,</del> 2018
III. Name of Client			Date April 9, 2018
Political Contributions			
	ion that is reportable p	ursuant to RSA Chap	ter 664 paid on behalf of the
client/lobbyist and lobbying		-	•
	Innis	Dan	
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
40	,	,	
Amount of contribution $\frac{10}{}$	00.00	Office Candidate is	s Seeking Senate
	ribution on the line above		ds or services provided, and enter the ution. If the actual cost is not know
	ribution on the line above		
enter an estimated value and the	ribution on the line above ne word "estimate."  Ward	e for amount of contribu	ution. If the actual cost is not know
enter an estimated value and the	ribution on the line above ne word "estimate."	e for amount of contribu	
Full name of candidate:	ward (Last Name)	e for amount of contribu	(Middle Name/Initial)
Full name of candidate:  Amount of contribution \$ 100  If the contribution is an in-kin actual cost of the in-kind contribution contribution is an in-kind c	Ward (Last Name) 00.00 d contribution, provide a ribution on the line above	Ruth (First Name) Office Candidate is	(Middle Name/Initial)
Full name of candidate:  Amount of contribution \$ 100  If the contribution is an in-kin	Ward (Last Name) 00.00 d contribution, provide a ribution on the line above	Ruth (First Name) Office Candidate is	(Middle Name/Initial) s Seeking Senate ds or services provided, and enter to

enter an estimated value and the word "estimate."	ve for amount of contribution. If the actual cost is not known,
If more than three contributions were made, report addition	nal contributions on congrete addendum C forms
in those than three contributions were made, report addition	nai contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 an	d hereby swear or affirm that the foregoing information
is true and complete to the best of my knowledge	
	July 19, 2018
(Signature of loboyist)	(Date)
(0.8	
Debra Vanderbeek	

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**Lobbyists Report of Political Contributions** Addendum C (RSA Chapter 15:6)

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Legislative	Solutions, L.L.C.		
(Name of parts	nership, firm or corporation)		716
III. Name of Client	<del></del>		Jvly 19, Date <del>April 9,</del> 2018
Political Contributions For each political contribut client/lobbyist and lobbyin			oter 664 paid on behalf of the
Full name of candidate:	Bradley	Jeb	
-	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 10	00.00	Office Candidate i	s Seeking Senate
		ve for amount of contrib	ution. If the actual cost is not know
enter an estimated value and t	he word "estimate."		ution. If the actual cost is not know
enter an estimated value and t	he word "estimate."  Ward	Ruth	
Full name of candidate:	ward (Last Name)		(Middle Name/Initial)
Full name of candidate:  Amount of contribution \$ 100  If the contribution is an in-kind actual cost of the in-kind cont	Ward (Last Name) 00.00 d contribution, provide ribution on the line above	Ruth (First Name) Office Candidate is	(Middle Name/Initial)
Full name of candidate:  Amount of contribution \$ 100  If the contribution is an in-kin	Ward (Last Name) 00.00 d contribution, provide ribution on the line above	Ruth (First Name) Office Candidate is	(Middle Name/Initial) s Seeking Senate ds or services provided, and enter th

If the contribution is an in-kind contribution, provide a descrip actual cost of the in-kind contribution on the line above for an	otion of the goods or services provided, and enter the
enter an estimated value and the word "estimate."	iodate of contribution. If the actual cost is not known,
(If more than three contributions were made, report additional contrib	outions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby is true and complete to the best of my knowledge and be	
	July 19, 2018
(Signature of loobyist)	(Date)
Debra Vanderbeek	
(Print Name of lobbyist)	

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Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

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JUL 1 6 2018

Legislative S	Solutions, L.L.C.		
(Name of partn	ership, firm or corporation)		21419,
III. Name of Client			<sub>Date</sub> <del>April 9</del> , 2018
Political Contributions For each political contributi client/lobbyist and lobbying			oter 664 paid on behalf of the
Full name of candidate:	Boutin	David	
_	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 250	0.00	Office Candidate i	s Seeking Senate
	Malf	Torry	
Full name of candidate:	Wolf (Last Name)	Terry (First Name)	(Middle Name/Initial)
	(Last Name)		,
	(Last Name) .00 d contribution, provide ibution on the line abo	(First Name)  Office Candidate is a description of the good	,
Amount of contribution \$ 250  If the contribution is an in-kind actual cost of the in-kind contr	(Last Name) .00 d contribution, provide ibution on the line abo	(First Name)  Office Candidate is a description of the good	Seeking Senate  ds or services provided, and enter the

If the contribution is an in-kind contribution, provide a description	
actual cost of the in-kind contribution on the line above for amoun enter an estimated value and the word "estimate."	t of contribution. If the actual cost is not known,
control and community value and the word community.	
(If more than three contributions were made, report additional contribution	ns on caparate addendum ( forms )
th more than three contributions were made, report additional contribution	is on separate addendant & forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby sw	ear or affirm that the foregoing information
is true and complete to the best of my knowledge and belief.	
	July 19, 2018
(Signature of lobbyist)	(Date)
(Signature of 1000y1st)	(Date)
Debra Vanderbeek	
(Print Name of lobbyist)	

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

# RECEIVED JUL 1 6 2018 NEW HAMPSHIRE DEPARTMENT OF STATE

Name of Lobbying pa	rtnership, firm, or corpo	oration: Legislative Solutio	ns	
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not related to a	ny
particular client):				_
Date of Report (check	one):			
April 25, 2018 □	July 25, 2018 🗡	October 31, 2018 🗆	January 30, 2019 □	
-	-		nd Expenses described above, a umber of Addendum forms bei	
Addendum A(	s).			
Addendum B(	s).			
Addendum C(	s).			
- 4	f my knowledge and be	lief.	nt and each Addendum is true a  19, 2018  (Date)	ınd
Robert (	. 188 (St) ()			

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.



Name of Lobbying pa	rtnership, firm, or corpo	oration: Legislative Solution	ns	
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not related to a	– ny
particular client):				_
Date of Report (checi	k one):			
April 25, 2018 □	July 25, 2018 🙇	October 31, 2018 □	January 30, 2019 🗆	
	The state of the s		nd Expenses described above, a umber of Addendum forms bein	
Addendum A	(s).			
Addendum Be	(s).			
Addendum Co	(s).	•		
	rm that the foregoing in f my knowledge and bel		nt and each Addendum is true ar	nd
Vest	·	July	19, 2018	
(Signature of lobbyist	)		(Date)	
Print Name of lobbyi	Karovtas			
trum rame or loody	<i>э</i> ເ <i>j</i>			

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

# PECEIVED JUL 1 6 2018 NEW HAMPSHIRE DEPARTMENT OF STATE

Name of Lobbying pa	rtnership, firm, or corpo	oration: Legislative Solutio	ns
		or the partnership, firm, or	corporation and not related to any
particular client):			
Date of Report (check	(one):		
April 25, 2018 □	July 25, 2018 🗴	October 31, 2018 🗆	January 30, 2019 □
			nd Expenses described above, and umber of Addendum forms being
Addendum A	(s).		
Addendum B(	(s).		
Addendum C(	(s).		
Lann	f my knowledge and be	lief.	nt and each Addendum is true and
(Signature of lobbyist	)		(Date)
Leann	Maccia		
(Print Name of lobbyi	st)		

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

# JUL 1 6 2018 NEW HAMPSHIRE DEPARTMENT OF STATE

Name of Lobbying par	tnership, firm, or corpo	oration: Legislative Solution	ons	
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not related to	o any
particular client):				
Date of Report (check	one):			
April 25, 2018 □	July 25, 2018	October 31, 2018 🗆	January 30, 2019 □	
			nd Expenses described above number of Addendum forms I	-
Addendum A(	s).			
Addendum B(	s).			
Addendum C(	s).			
	m that the foregoing in my knowledge and bel		ent and each Addendum is true	e and
( Tuist	L Afler	July	19, 2018	
(Signature of lobbyist)			(Date)	
Chris Ho	LR			
(Print Name of Jobhyis	st)			